

OFFICE OF THE CITY CLERK

AND COUNTY O F HONOLULU 5 3 0 SOUTH KING STREET, ROOM 1 0 0 HONOLULU, HAWAII 9 6 8 1 3-3 0 7 7 TELEPHONE: (808) 768-3810 • FAX: (808) 768-3835

AUTOMATIC ACCEPTANCE OR REJECTION OF GIFTS

Ref: D-466

DATE:

August 14, 2018

TO:

Tracy S. Kubota, Deputy Director Department of Enterprise Services

SUBJECT: Gifts of value at \$2,500 or less

Pursuant to Resolution 05-349, CD1, FD1, relating to the guidelines for the solicitation and receipt of gifts on behalf of the City and County of Honolulu, a request for acceptance of gifts (Communication D-466) was filed with the Council on July 12, 2018. As of August 11, 2018 the gifts were deemed accepted.

GLEN TAKAHASHI

City Clerk

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Enclosure: D-466

Acknowledgement:

ERNEST Y. MARTIN Chair, Honolulu City Council

ISJULIZAM B: 29 CITYCLERK

DEPARTMENT OF ENTERPRISE SERVICES

GOLF COURSE DIVISION * HONOLULU ZOO * NEAL S. BLAISDELL CENTER * WAIKIKI SHELL

CITY AND COUNTY OF HONOLULU

777 WARD AVENUE · HONOLULU, HAWAII 96814-2166
PHONE: (808) 768-5400 * FAX: (808) 768-5433 * INTERNET: <u>www.honolulu.gov/des</u>

KIRK CALDWELL MAYOR



GUY H. KAULUKUKUI DIRECTOR

TRACY S. KUBOTA
DEPUTY DIRECTOR

July 12, 2018

The Honorable Ernest Y. Martin Chair and Presiding Officer and Members Honolulu City Council 530 South King Street, Room 202 Honolulu, Hawaii 96813

Dear Chair Martin and Councilmembers:

SUBJECT: Quarterly Report of Gifts Valued at \$2,500 or Less and Requested Acceptance

This report to Council enumerates all gifts taken into custody by the Department of Enterprise Services for the quarter ending June 30, 2018. This report is submitted under the provisions of Resolution No. 05-349, CD1, FD1. Information on each gift is set forth in the attached Exhibit A.

We respectfully request the acceptance of these gifts by the Council on behalf of the City and County of Honolulu.

Should you have any questions regarding this matter, please contact me at 768-5415.

Sincerely,

Tracy S. Kubota Deputy Director

Attachment

APPROVED:

Roy K. Amemiya, Jr. Managing Director

DEPT. COM. 466

BUDGET

QUARTERLY REPORT OF GIFTS RECEIVED VALUED AT \$2,500 OR LESS UNDER RESOLUTION NO. 05-349, CD1, FD1

CITY AGENCY: Department of Enterprise Services

QUARTER ENDING: June 30, 2018

The following gifts were taken into custody by the agency in the previous quarter.

Description of the Gift	Donor's Estimated Value of the Gift	<u>Donor</u>
Monetary Donation to the Honolulu Zoo	\$700.00	Mr. Edward Gonzalez Service Systems Associates 151 Kapahulu Avenue Honolulu, Hawaii 96815
Monetary Donation to the Honolulu Zoo	\$24.00	Ms. Carrie Knebel Sacred Hearts Academy 3253 Waialae Avenue Honolulu, Hawaii 96816
Monetary Donation to the Honolulu Zoo	\$8.00	Ms. Sharon Tanaka He'eia Elementary School 46-202 Haiku Road Kaneohe, Hawaii 96744
Monetary Donation to the Honolulu Zoo	\$8.00	Mr. Ben Shimabuku Aiea High School 98-1276 Ulune Street Aiea, Hawaii 96701
Monetary Donation to the Honolulu Zoo	\$58.00	Ms. Leigh Okazaki Lehua Elementary School 791 Lehua Avenue Pearl City, Hawaii 96782
Monetary Donation to the Honolulu Zoo	\$14.00	Ms. Momi Kuahiwinui Island Pacific Academy 909 Haumea Street Kapolei, Hawaii 96707
Towels, blankets, sheets and Clothing to the Honolulu Zoo	No Value	Ms. Ann Watanabe Savers 1505 Dillingham Blvd. Honolulu, Hawaii 96817

DECLARATION OF GIFT		
NAME OF DONOR	Service Systems Associates	
DONOR'S ADDRESS	151 Kapahulu Ave. Hon. HI 96815	
DONOR'S TELEPHONE		

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant, and convey the property to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
Complete an accurate description of the gift in detail. Enclose a photo if available.	Actual or Estimated
Tour Donation for the month of June 2018 to go to the Honolulu Zoo	\$400.00
Signature: Date: 6/15/18	

Title: Event Coordinator

Print Name: Edward Gonzalez

DECLARATION OF GIFT		
NAME OF DONOR	Service Systems Associates	
· DONOR'S ADDRESS	151 Kapahulu Ave. Hon. HI 96815	
DONOR'S TELEPHONE		

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant, and convey the property to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
Complete an accurate description of the gift in detail. Enclose available.	Actual or Estimated
Tour Donation for the month of April 2018	\$150.00
·	
Signature: Date: 4	/20/19

Title: Event Coordinator

Print Name: Eddii Gonzalez

DECLARATION OF GIFT	
NAME OF DONOR	Service Systems Associates
DONOR'S ADDRESS	151 Kapahulu Ave. Hon. HI 96815
DONOR'S TELEPHONE	

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant, and convey the property to the City and County of Honolulu.

DESCRIPTION OF GIFT		VALUE
Complete an accurate description of the gift in detail available.	. Enclose a photo if	Actual or Estimated
Tour Donation for the month of March 2018		\$150.00
Signature:	Date: 3/31/18	
Print Name: Eddii Gonzalez	Title: Event Coordinat	or

DECLARATION OF GIFT		
Name of Donor Sacred Hearts		
Donor's Address 3253 Waialce aw.		
Donor's Telephone S41-779-1703		
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONV	EYANCE	
I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.		
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	VALUE	
Complete and accurate description of gift in detail. Enclose a photo if available. 23.00.00.00.00.00.00.00.00.00.00.00.00.00	Actual or Estimated	
HUNUL.UL.U ZI 151 KAPAHULU AVE PHONE: 971-7171 04-11-2038 WED #2 38x 2.00@ 50E 18RADE K-6 20x 8.00@ 10P FACHERS 1 23 CATEND 23 CATEND 23 TOTAL 23 CATEND 23 TOTAL 23 ANNETTE 4060 (24.00	
Signature: Date: UNIO		
Print Name: Will WPM Title: Teacher		

	DECLARATION OF GIFT	
Name of Donor	He'eia Elementary Schoo	
Donor's Address	He'eia Elementary School 46-202 Haiku Road	
Donor's Telephone	(808) WKGLEV 233-5677	
STATEMENT	OF OWNERSHIP AND/OR TERMS OF CONV	EYANCE
Honolulu. To carry or	ed below and desire to give the property to the City and Cast my purpose, I do hereby absolutely and without condition the property to the City and County of Honolulu.	
		VALUE
Complete and accurate available.	description of gift in detail. Enclose a photo if ** ** ** ** ** ** ** ** **	Actual or Estimated
·	MCNCLULU 27 151 KAPAHULU AVE PHONE: 971-7171 04-18-2018 WED #2 52x 2.006 DOE GRADE K-6 17x 8.006 DOE TEACHERS SUBTL CATEND CATEND CHANGE 1TEM 69 ANNETTE 544	\$ 8.00
Signature: Shan	m Janahe Date: 4-18-18	
Print Name: Shara	in Tanaka Title: K Teach	er

		· ·	
	DECLARA	ATION OF GIFT	
Name of Donor	Good Friend	5 Club (Area 145	Shinah.
Donor's Address	A45 > 98-129	s Club (Aira 145) 16 Ulune St airea	96201
Donor's Telephon			
STATEME	NT OF OWNERSHIP	AND/OR TERMS OF CON	VEVANCE
,	ey the property to the City		
			VALUE
	te description of gift in det	ail. Enclose a photo if 00.800 00.0	Actual or Estimated
Aira High Sch	그를 だ	DOE TEACHERS SUBTL TOTAL CATEND CHANGE ITEM 19 JULIET 69	
nature: Olw		1/2 2/	
t Name: Beh	Shimabuka	Date: H25118 Title: Courselo	

DECLARATION OF GIFT		
Name of Donor	Lehna Elementary School	
Donor's Address	Lehna Elementary School 191 Lehna Ave (808) 307-3700	
Donor's Telephone	(808) 307-3700	
STATEMENT	OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.		
**************************************	Check: 153 Check: 153 GS/03/2018 09:134M 64 GRADE K-6 26 TEACHER 208.00 CASH SUBTOTAL Tax Change Duse Paywent Rahalo! Please come again. Order Number: 153	
Signature: Rece	Date: 5/3/18 Title: Teacher	
Print Name: Le10	th Okazaki Title: Teacher	

	DECLARATION OF GIFT
Name of Donor	Island Pacific Academy 909 Haumea St Kapolei 674-3580
Donor's Address	909 Haumea St Kapolei
Donor's Telephone	674-3580
STATEMENT	OF OWNERSHIP AND/OR TERMS OF CONVEYANCE
Honolulu. To carry ou	ed below and desire to give the property to the City and County of at my purpose, I do hereby absolutely and without condition or reservation the property to the City and County of Honolulu.
	VALUE
***** ZOO WE 171	Actual or Estimated Actual or Estimated Actual or Estimated
**************************************	Check: 104 05/22/2018 09:234M *** REPRINT *** 31 GRADE K-6 41 GRADE 7-12 5 TEACHER CASH SUBTOTAL Tax PAYMENT Change Due 05/22/2018 09:24:234M Mahalo! Please come again. Order Number: 1
Signature: Monu 9	martine Date: May 22, 2018
Print Name: Momi	Kyahiwinyi Title: Kindupsten Teacher

City a	nd County of Honolulu	
DEC	LARATION OF GIFT	
NAME OF DONOR DONOR'S ADDRESS	Savers eto Ann Watarabe 1505 Dilhaghan Blyst, Honolula, (II 9981)	
DONOR'S TELEPHONE	\$08-842-0061 RSHIP AND/OR TERMS OF CON	and the second s
Heriolulu 16 con y out my purpose 1 give grand and convey the property is	esize to give the property to the City ar do hereby absolutely and without con- othe City and County of Hopolulu	principal reservation
DESCRIPTIO Complete and accurate description of g	ON OF GIFT	VALUE
करकरा। एड इ.स.च्या ११ व्		Action of Unimped
Six (1) garbage sized bags of unsellable Johnny	atemple, blankets, sheets and your	No Value

Complete and accurate description of giff in detail. Uncluse a phase if possible	Actual of
Six on garbage sized traps of unsellable towels, blankets, sheets and some cluthing	No Value
Signature: On Wiranabe Date: 6/19/18 Title: Community Oon	